
MAINE INTEGRATED HEALTH MANAGEMENT SOLUTION ENROLLMENT CHECKLIST FOR PROVIDER GROUPS

Part A. Definitions

A provider group is a collective group of individual practitioners providing healthcare services. There are two types of provider groups, including:

- A provider group that operates under a Federal Employer Identification Number [FEIN] and a Type 2 Organizational NPI. This includes incorporated individual providers.
- A sole proprietorship that operates as a group under the SSN of the sole proprietor.

The individual practitioners associated to provider groups are affiliated as rendering providers with a Type 1 Individual NPI.

Note that an incorporated individual provider is considered to be a provider group for this enrollment and should follow this checklist. An incorporated individual provider must obtain a Type 2 Organizational NPI in addition to a Type 1 Individual NPI.

Part B. Checklist

When enrolling a provider group, it will be useful to have the following information, forms, and other documents on hand:

- ☐ For the pay-to provider:
 - NPI
 - Tax ID—Federal Employer Identification Number (FEIN) or Social Security Number (SSN)
 - Name, title, and email address of the office contact person
 - Phone numbers—primary (required), secondary, emergency, mobile, and fax
 - Copy of a cancelled check or bank letter to meet the requirements for Electronic Funds Transfer enrollment (if applicable)
 - Signed and dated EFT Agreement document (if applicable)

- ☐ For owners and/or board members:
 - The name, Social Security Number, tenure dates, and address information for all owners and/or board members
 - If any owner or board member is an organization, the FEIN for the owner or board member
 - Information regarding sanctions, exclusions, or convictions of owners and/or board members
 - Information regarding owners' and/or board members' participation in other organizations that bill Medicaid for services
 - The relationships among owners and/or board members
 - Information regarding the provider, owners, and employees with respect to certain legal situations

☐ For service locations:

- The physical and mailing addresses of the provider's service location(s)
- For re-enrolling providers only—the current MeCMS ID assigned to the provider's service location(s)
- A list of any languages spoken by the provider and his or her staff, in addition to English
- General information about each service location, such as accessibility, office hours, whether the service location is accepting new patients, and the age range and gender restriction for patients
- The provider type/specialty pairs that represent the provider's practice, as well as all licensing and certification documents for those provider type/specialty pairs
- Information about participation in MaineCare programs, including specifics for the Primary Care Case Management program, if applicable

☐ For rendering providers:

- Each rendering provider's NPI, name, address, gender, phone number, and fax number
- The provider type/specialty pairs that represent the provider's practice, as well as all licensing and certification documents for those provider type/specialty pairs
- Information about participation in the Primary Care Case Management program, if applicable
- A list of the service locations to which the provider is affiliated